

State of Indiana Rx Benefit Comparison Summary of Benefits for 2014

Deductibles and out-of-pocket maximums:

	CDHP 1		CDHP 2		Traditional PPO	
	In-Network	Out-of-Network	In-Network	Out-of-Network	In-Network	Out-of-Network
Deductible						
Single	\$2,500		\$1,500		\$ 750	\$1,500
Family	\$5,000		\$3,000		\$1,500	\$3,000
Out-of-pocket maximum						
Single	\$4,000		\$3,000		\$2,500	\$5,000
Family	\$8,000		\$6,000		\$5,000	\$10,000

Copay/co-insurance after deductible is met and before out-of-pocket maximum is satisfied (applies to all three plans: CDHP 1, CDHP 2, Traditional PPO):

Prescription drugs	Retail (up to 30 day supply)	Mail order (up to 90 day supply)
Preventive (generics mandated by the Affordable Care Act)	\$0 (not subject to the deductible)	\$0 (not subject to the deductible)
Generic	\$10 copay	\$20 copay
Brand, Formulary	20% Min \$30, max \$50	20% Min \$60, max \$100
Brand, Non-formulary	40% Min \$50, max \$70	40% Min \$100, max \$140
Specialty	40% min \$75, max \$150 (30 day supply)	

*For more information on the preventive drugs covered 100% by our plan, call Express Scripts (formerly Medco) at 1-877-841-5241.